

CLAIMS ONLY

Application Number 10536619	Filing Date
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Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
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27						
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29						
30	1					
31		/				
32		/				
33		/				
34		/				
35		/				
36		/				
37		/				
38		/				
39		/				
40		/				
41		/				
42		/				
43	1	/				
44		/				
45		/				
46		/				
47		/				
48		/				
49	1					
50		/				
Total Indep	4					
Total Depend	21					
Total Claims	25					

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
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52		/				
53		/				
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Total Indep						